09/807 (?) 4

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

BEST AVAILABLE COPY

Claim		Date							
Final	Original	9/02	2/03	10/03					
1	(1)	✓	✓	✓					
2	2	✓	✓	O					
3	3	✓	✓	O					
4	4	O	O	O					
5	5	✓	✓	O					
6	6	✓	✓	O					
7	7	O	O	O					
8	8	✓	✓	O					
9	9			O					
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30	30	✓	✓	✓					
31	31	O	O	O					
32	32	✓	✓	O					
33	33	✓	✓	O					
34	34	O	O	O					
35	35	✓	✓	O					
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If more than 150 claims or 10 actions
staple additional sheet here

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